

PATENT APPLICATION FEE DETERMINATION RECORD
Effective January 1, 2003

Application or Docket Number

019501000M954-US0

CLAIMS AS FILED - PART I

| | | (Column 1) | (Column 2) |
|----------------------------------|---------------|--------------|--------------------------|
| TOTAL CLAIMS | 14 | 14 | 14 |
| FOR | NUMBER FILED | NUMBER EXTRA | |
| TOTAL CHARGEABLE CLAIMS | 14 minus 20=* | - | |
| INDEPENDENT CLAIMS | 1 minus 3=* | - | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | <input type="checkbox"/> |

* If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED - PART II

| AMENDMENT | CLAIMS REMAINING AFTER AMENDMENT | (Column 1) | (Column 2) | (Column 3) |
|---|---|------------|------------|------------|
| | | | | |
| Total | * | 14 | Minus | 20 |
| Independent | * | | Minus | 13 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | |

| SMALL ENTITY | OTHER THAN SMALL ENTITY |
|--------------|----------------------------|
| RATE | RATE |
| BASIC FEE | BASIC FEE |
| X\$ 9= | X\$18= |
| X 12= | X84= |
| X 0= | +280= |
| TOTAL | TOTAL |
| OR | OR |

| SMALL ENTITY | OTHER THAN SMALL ENTITY |
|-------------------|----------------------------|
| RATE | RATE |
| ADDITIONAL FEE | ADDITIONAL FEE |
| X 3= | X\$18= |
| X 2= | X84= |
| X 0= | +280= |
| TOTAL FEE | TOTAL ADDITIONAL FEE |
| OR | OR |

| SMALL ENTITY | OTHER THAN SMALL ENTITY |
|-------------------|----------------------------|
| RATE | RATE |
| ADDITIONAL FEE | ADDITIONAL FEE |
| X 3= | X\$18= |
| X 2= | X84= |
| X 0= | +280= |
| TOTAL FEE | TOTAL ADDITIONAL FEE |
| OR | OR |

| SMALL ENTITY | OTHER THAN SMALL ENTITY |
|-------------------|----------------------------|
| RATE | RATE |
| ADDITIONAL FEE | ADDITIONAL FEE |
| X 3= | X\$18= |
| X 2= | X84= |
| X 0= | +280= |
| TOTAL FEE | TOTAL ADDITIONAL FEE |
| OR | OR |

| AMENDMENT | CLAIMS REMAINING AFTER AMENDMENT | (Column 1) | (Column 2) | (Column 3) |
|---|---|------------|------------|------------|
| | | | | |
| Total | * | 14 | Minus | 20 |
| Independent | * | | Minus | 13 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 2.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than

The "Highest Number Previously Paid For" (Total or Independent) is the

number for the appropriate box in column 1.

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